PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE
Commissioner for Patents

Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 or Fax (571)-273-2885

Certificate of Malling or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks I through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be maintenance or included unless corrected below or directed otherwise in Block I, by a specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Nose: Use Block I for any change of address)

Note: A certificate of mainting can only be used for domestic mainings of the Fee(s) Transmittal. This certificates on be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of maintenance.

579 THOMPSON AVENUE EAST HAVEN, CT 06512				States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop 1SSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.		
						(Depositor's name)
						(Signature)
						(Date)
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR	,	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/550,076	09/20/2005		Fitz Walker JR.		BAR 20299	1677
TITLE OF INVENTION:	SYSTEM AND METH	OD FOR RAPIDLY IDE	ENTIFYING PATHOGENS	S, BACTERIA AND	ABNORMAL CELLS	
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE	FEE TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$720	\$300	\$0	\$1020	03/10/2008
EXAMINER		ART UNIT	CLASS-SUBCLASS			
JOHNS, AN	DREW W	2624	382-133000			
. Change of correspondence address or indication of "Fee Address" (37 2. For printing on the patent front page, list (1) the names of un to 3 resistered natent attorneys.						
	ondence address (or Cha	nge of Correspondence	or agents OR, alternatively,			
Change of correspondence address for Change of Correspondence Address form PLOSB/H22) attactles Color PLOSB/H22 (attactles Color PLOSB/H22) attactles Color						
PTO/SB/47; Rev 03-0: Number is required.	2 or more recent) attach	icd. Use of a Customer	2 registered patent attorneys or agents. If no name is listed, no name will be printed.			
I. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)						
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.						
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)						
Bart	ron Medical	l Imaging, L	LC Ne	w Haven,	CT	
Please check the appropriate assignee category or categories (will not be printed on the patent) : 🔲 Individual 🕻 Corporation or other private group entity 🚨 Government						
la. The following fee(s) a	are submitted:	41	b. Payment of Fee(s): (Plea	se first reapply any	previously paid issue fee:	shown above)
Issue Fee			A check is enclosed.			
Publication Fee (No small entity discount permitted)			Payment by credit card. Form PTO-2038 is attached.			
Advance Order - # of Copies			The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number(enclose an extra copy of this form).			
	us (from status indicate SMALL ENTITY state		□ h Applicant is no lone	sar claimina SMALI	L ENTITY status. See 37 CF	EP 1 27(a)(2)
					ered attorney or agent; or th	
Authorized Signature	Premal	A Numar	<u></u>		22-2008	
•	Raymond	A. Nuzzo			37199	
Typed or printed name				Registration No	. 3/133	

25306

7590

12/10/2007

LAW OFFICES OF RAYMOND A. NUZZO, LLC

This collection of information is required by 37 CFR 1311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentially is governed by 51 US, C 12 and 17 CFR 1.4. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and this form and/or suggestions for retaining the USPTO. The USPTO of the USPTO. The USPTO of the USP

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.